Great Yarmouth and Waveney

Policy on Cleaning and Disinfection of Equipment, Surfaces, Environment and Skin

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Approvals

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1. Introduction

All medical devices, equipment, and the environment in healthcare settings may become contaminated with micro-organisms and thus can present a risk to patients, as well as to those subsequently handling or using equipment. Safe and effective decontamination of all re-useable equipment between uses is an essential part of routine infection prevention and control practice. Inadequate decontamination has been responsible for outbreaks of infection in healthcare establishments.

Similarly skin may also be contaminated with micro-organisms and can develop into a source of infection due to flora transfer both to the patient and others. It is therefore essential to practice and encourage standard principles of infection control (including hand hygiene) at all times and with all patients.

2. Purpose and scope

This document applies to all staff employed by NHS Great Yarmouth and Waveney.

3. Policy Statement

This policy is recommended for best practice and providers are expected to implement wherever practicable risk assessments must be submitted to the decontamination lead for instances when this policy is not adhered to.

4. Responsibilities

It is the responsibility of all staff to ensure that they adhere to best practice

5. Policy monitoring

It is the responsibility of all department heads/professional leads to ensure that the staff they manage adhere to this policy. The community services decontamination lead will audit the use of this policy, in conjunction with department heads/professional leads of Community Services, bi-annually and submit to JICC as part of the annual decontamination report. Team leaders are required to complete all required audits.

6. Review

This policy will be reviewed by the Infection Prevention and Control Team in conjunction with community services decontamination lead.

7. Guidance on the use of Health Care Devices

Single use
The medical device is intended to be used once on an individual patient during a single procedure and then discarded. It is not intended to be re-processed or re-used on another patient. The re-use of single-use medical devices can affect their safety, performance and

effectiveness, exposing patients and staff to unnecessary risk. Current Health Service Circulars (HSC's) and MDA guidance clearly state that medical devices designated for single-use must never be re-used.

A European standard symbol is used on packaging for all medical devices intended for single-use only. All staff involved in the decontamination process should be aware of and understand this symbol and its meaning.

Single Patient use
The medical device can be used more than once on **one patient only**. The device may need to be decontaminated between each use.

Re-usable
The medical device can be used for repeated episodes on different patients, but requires appropriate decontamination between each use.

The following leaflets are produced by the Medicines and Healthcare products Regulatory Agency (MHRA), and are a useful source of relevant information and explanation.

Single-use Medical Devices

How do I know if a device is for single-use?

It will have this symbol on the packaging or the device:

What does single-use mean?

Do not reuse. A single-use device is used on an individual patient during a single procedure and then discarded. It is not intended to be reprocessed and used again, even on the same patient.

Is single-patient use the same as single-use?

No. Single-patient use means the medical device may be used for more than one episode of use on **one patient only**; the device may undergo some form of **reprocessing** between each use.

Why shouldn't they be reused?

The MHRA is aware of serious incidents relating to reuse of single-use devices.

Reuse can be unsafe because of risk of:

- cross-infection – inability to clean and decontaminate due to design.
- endotoxin reaction – excessive bacterial breakdown products, which cannot be adequately removed by cleaning.
- patient injury – device failure from reprocessing or reuse because of fatigue, material alteration and embrittlement.
- chemical burns or sensitisation – residues from chemical decontamination agents on materials that can absorb/adsorb chemicals.

Also, if you reuse a single-use device you may be legally liable for the safe performance of the device.

Can I sterilise a single-use device?

A few single-use devices are marketed as non-sterile. These may require processing, in line with the manufacturer's instructions, to make them sterile and ready for use. You must not resterilise them.

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October 2006 website version

8. Further examples of symbols commonly used on health care devices and their packaging.

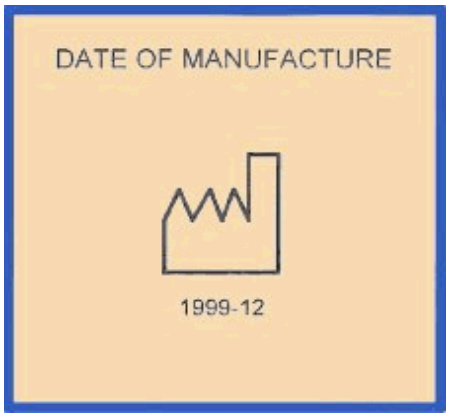
These are explained in more detail in the British and European Standard *BS EN 980: 1997 Graphical symbols for use in the labelling of medical devices.*

If further clarification is required please refer to the product instructions or user manual.

1.

2.

3.



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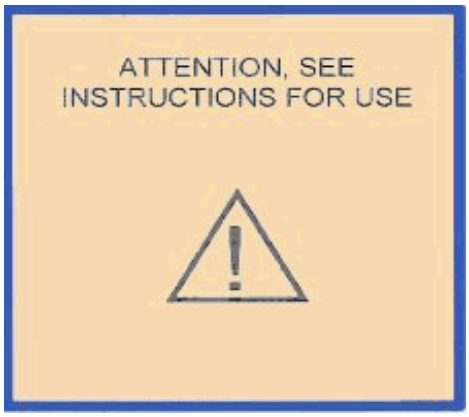

9. Decontamination

Decontamination is a process that removes or destroys contamination and thereby prevents micro-organisms or other contaminants reaching a susceptible site in sufficient numbers to initiate infection or any other harmful response.
It includes the processes of:

- Cleaning
- Disinfection
- Sterilisation

9.1 Cleaning

Cleaning is a process that physically removes extraneous matter from devices, but does not destroy all micro-organisms.

9.1.1 Manual Cleaning

This can be achieved manually with detergent and hot water; prepared in clean container and with the use of a disposable cloth. Drying is essential to prevent any remaining bacteria from multiplying.

9.1.2 Mechanical cleaning (these are not currently by used in NHS GY&W community services staff)
There are two main types of mechanical cleaning:-

- An Instrument Washing Machine will wash and dry devices. This machine should be used strictly to manufacturer's instructions.
- The preferred method of mechanical cleaning is by Ultrasonic apparatus. This dislodges organic and other matter from surfaces.

9.2 Disinfection

Disinfection is the removal or destruction of micro-organisms but not necessarily bacterial spores and/or some viruses.

- Disinfection does not sterilise.
- Disinfection of medical devices must be carried out by properly trained and competent staff.
- Disinfection should be carried out to a written procedure, based on a risk assessment and in accordance with manufacturer's instructions.
- Disinfection can be achieved by heat or by chemical means and must always be preceded by cleaning.
- Incorrect concentrations may render a disinfectant ineffective.

9.3 Sterilisation

Sterilisation is a process used to render objects free from viable micro-organisms including bacterial spores and viruses.

10. Choosing the appropriate method of Decontamination

Risk	Indication	Recommendation
High	Items that penetrate skin / mucous membranes or enter sterile body areas.	Cleaning followed by **Sterilisation**
Medium	Items in contact with intact mucous membranes, or contaminated with blood / body fluids	Cleaning followed by **Disinfection** (Except for instruments used in the vagina or cervix, e.g. speculae which must be sterilised between each use).
Low	Items in contact with intact skin or not in direct patient contact.	Cleaning

Chlorine releasing agent dilution instructions	**Tablet size**	**0.5g tablets**	**1.7g tablets**	**2.5g tablets**	**5g tablets**
Blood spillage (10,000ppm)	Number of tablets	18	10	7	4
	Amount of water in litres	0.5	1	1	1
General clinical environment (1,000ppm)	Number of tablets	4	1	1	1
	Amount of water in litres	1	1	1.5	3

It is essential that fresh batches of the chlorine releasing solutions are made up as required. Made up solutions must be discarded after 24 hours.
Inpatient areas must use Acticlor plus for high level cleaning to kill bacteria, viruses and spores, instructions on the label are to be followed

It is vital that where possible the area is well ventilated when using this product, and PPE is worn when mixing as well as using chlorine releasing products, cold water dilution will minimize the odour.

11. Environmental cleaning following patient discharge or bed movement

1. Patient bed areas (to include beds, table, locker, chair and all other equipment used in that area e.g. drip stands) must be cleaned thoroughly with hot water and detergent following discharge before next patient can be admitted into the vacated bed space.

2. Areas occupied by patients with a known infection should be cleaned using hot water and detergent then disinfected using a chlorine releasing agent.

3. The Infection Prevention and Control team may be contacted for further advice regarding curtain changes and steam cleaning etc.

4. Any contamination of the walls should be cleaned immediately therefore terminal wall washing is not required.

12. Cleaning of skin

Procedure	Product
Skin Hand Washing	• For normal hand washing liquid soap is adequate. • Patients at bed side must be offered hand wipes after using the commode and before meals if unable to access soap and water
Skin Hand rubs	• Hand sanitiser should be used if hands visibly clean and no contact with patient suffering from diarrhoea. This gel should be available at the point of use and be an approved brand.
Skin Injection Sites Venepuncture Cannulation site	• Clean with 70% isopropyl alcohol e.g. steret / mediswab prior to injection unless otherwise contra-indicated by the manufacturers. • Swab the intended site with a swab containing 70% alcohol and allow to dry. • Swab the intended site with a swab containing 70% isopropyl and 2% chlorhexidine gluconate and allow to dry see guidelines in Saving Lives. VIP scoring must be documented.
Wound Cleaning	• Wounds with minimal to moderate discharge can be cleaned with warm normal saline 0.9% sterile solution. • Tap water of drinking quality can be used to irrigate wounds and to soak leg ulcers prior to dressings.

13. Cleaning / Disinfection Chart A-Z

Item	Recommended Method	Comments
Acupuncture needles	Single use	Discard into sharps container conforming to British or United Nations current standards
Airways	Single use	
Ambu-bag / re-breathing bags	Dispose of filter and mask between uses and use disposable ambu-bags	
Ampoules	No preparation required	Discard into sharps container conforming to British or United Nations current standards
Auroscopes	Detachable earpieces single use item	
Baby changing mats	Cover with disposable paper roll and change between each baby. Clean with hot water and detergent at the end of the session or use a detergent wipe. If contaminated with body fluids mop up excess soiling with paper towels, clean as above then wipe with 70% isopropyl alcohol wipe	If the plastic cover becomes torn or damaged the mat must be discarded
Baby Scales	Line with disposable paper roll and change this between each baby. Clean with hot water and detergent at the end of each session or detergent wipe. If contaminated with body fluids mop up excess soiling with paper towels, clean as above then wipe with 70% isopropyl alcohol wipe	
Baths, bath hoists and seats, wash basins, shower chairs and seats	Clean with hot water and detergent or cream cleaner after each patient	
Baby feeding bottles and teats.	Baby feeding equipment must be disinfected between use by either a cold sterilising unit or a steam steriliser following manufacturers guidelines.	Wherever possible encourage parents to bring in pre-made up bottles that once used are rinsed and returned to the parent for cleaning at home.
Bed Cradles	**In hospital setting** Wash with detergent and water and dry thoroughly. **In patients own homes**: It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) When no longer required these should be returned to central equipment stores for cleaning prior to re-issue	**In hospital setting** Following use / discharge of a patients with a known infection or when contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent dilute as per instructions
Bed frames Bed sides	**In Hospital setting**: Daily wash with detergent and hot water – dry thoroughly **In patients own homes**: It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). When no longer required these should be returned to central equipment stores for cleaning prior to re-issue	**In hospital setting** Following use / discharge of a patient with a known infection or when contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent
Bedside tables	**In Hospital setting**	

Item	Recommended Method	Comments
	Clean with detergent and water and dry thoroughly daily, if soiled or if patient discharged. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent (for dilution see page 9) and dry thoroughly. **In patients own homes** It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) When no longer required these should be returned to central equipment stores for cleaning prior to re-issue	
Bed pans	**Disposable** – disposed of into macerator. In the event of machine failure inform works department immediately and dispose of bedpan contents / urinal into lavatory or sluice then place bedpan / urinal into clinical waste bag for disposal	Inserts must be used in all cases
Bed pans	**In patients own homes** Empty contents down the lavatory, wash with detergent and hot water and dry. Store to keep dust free. When no longer required these should be returned to central equipment stores for cleaning prior to re-issue	When undertaking these procedures appropriate personal protective equipment must be worn
Bedpan holders / slipper pan holders	Wash with detergent and hot water after every use, dry and store. If visibly contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent	These items should be replaced if showing signs of degradation
Blinds horizontal and vertical	Keep dust free – clean as per manufacturers instructions	Contact Infection Prevention and Control if considering purchasing blinds or replacing existing blinds
Blood glucose monitoring pen	Single patient use only – only use for one patient. Totally disposable units	The lancet containing the sharps should be discarded into sharps container conforming to British or United Nations current standards
Blood pressure sphygmomanometer and cuff	Wipe with hot water and detergent at least weekly or sooner if visibly contaminated. If unable to clean following contamination discard. Blood pressure cuff should not be placed next to broken skin if this unavoidable please contact infection prevention and control. For Doppler Cuffs please follow manufacturer's instructions.	Ideally patients in isolation should have their own blood pressure cuff. When purchasing new products avoid cloth where possible to improve the ability to clean the equipment
Breast pumps	Only electric breast pumps should be loaned - a supply of disposable milk collection sets should also be provided. **Advice to mother** is that the pump is cleaned with detergent and hot water then dry thoroughly daily. **Advice to staff on return of pump** clean as per manufacturers instructions	Hand breast pumps should not be loaned out as no disposable milk collection sets are available
Bowls (washing)	Patients must have own individual wash bowl. They must be cleaned with detergent and hot water rinsed and stored dry in or behind the patient locker **not** on the floor. Spare bowls must be stored dried, separately stacked upside down in pyramid formation off the floor in a clean area.	
Buckets	Wash with hot water and detergent, rinse and store dry.	

Item	Recommended Method	Comments
	Following contact with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly	
Buckets for Leg Ulcers	Line with a plastic bag (with only one opening and no holes). After each use dispose of the bag, clean the bucket with hot water and detergent, and rinse and dry thoroughly. If plastic bag lining splits clean with detergent and water followed by disinfection using a chlorine releasing agent – (for dilution see Page 8) and dry thoroughly	Store clean and dry
Car seats	Follow manufacturers guidance replace when visibly contaminated with blood or body fluids.	
Carpets	Vacuum daily. Vacuum cleaners need to comply with standards set in BS5415. Carpets in clinical area require a 6 monthly carpet shampoo. Clean spills immediately. The area should be immediately shampooed.	CARPETS ARE NOT RECOMMENED FOR CLINICAL AREAS as they are impractical to clean. Alternative types of flooring must be considered when replacing
Catheter bag holders	**In Hospital settings** Clean with hot water and detergent / detergent wipes between patients and at least weekly. If contaminated with blood or body fluids immediately clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly **In patients own homes**: It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) When no longer required these should be returned to central equipment stores for cleaning prior to re-issue	If using metal plastic coated catheter stands the plastic should be intact.
Cervical diaphragms and caps (practice caps)	Single patient use only	
Cleaning equipment: 1. Wet mops 2. Mop buckets	Disposable items Clean with hot water and detergent after each use and dry thoroughly- store inverted.	
Chairs	**At hospital sites and PCT health centres** Clean with detergent and hot water, rinse or use detergent wipes and dry thoroughly daily, if soiled or if patient discharged or at the end of each clinic. **In patients own homes**: It is the users responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). When no longer required these should be returned to central equipment stores for cleaning prior to re-issue.	Fabric chairs are **unsuitable** for clinical areas as they are impractical to clean. All chairs must be made of a fire retardant material
Combs	Patients must have their own individual comb. When visibly soiled, clean with hot water and detergent and dry thoroughly.	
Commodes	**At Hospital sites** Clean all surfaces with hot water and detergent and dry	Disassemble and clean commode thoroughly at

Item	Recommended Method	Comments
	thoroughly between each use. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly. **In patients own homes**: It is the responsibility of the user's to ensure the commode pot is emptied into a lavatory then rinsed and dried thoroughly. The pot should be stored in the commode. It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) When no longer required these should be returned to central equipment stores for cleaning prior to re-issue.	least daily. At the end of each shift is recommended. A record of cleaning must be maintained. If used for patient suffering from diarrhoea disinfect commode following cleaning with 1000ppm chlorine releasing agent.
Computers and other IT equipment in clinical areas	Keep dust free. If possible cover keyboard with plastic cover, the keyboard should be wiped with a detergent wipe and then dried. It is expected that individual staff / clinical staff take responsibility for the cleaning of this equipment.	Decontaminate hands after touching the keyboard either by washing or use of sanitising gel. Ensure that electrical supply is turned off before cleaning do not use large amounts of water.
Cold / hot pad	Must have a plastic covering to aid cleaning after each use with hot water and detergent or detergent wipes then dry thoroughly.	Do **not** store in drug or food fridge
Community equipment bags including those used by District Nurses	Clean by wiping over the bag with damp cloth containing detergent and water / detergent wipe. This should be undertaken at least weekly.	If bag machine washable follow manufacturers instructions regarding temperatures and wash weekly.
Couches (examination)	Clean with detergent and hot water / detergent wipe between patients and at weekly intervals, rinse and dry. Disposable paper sheeting should be used to cover the examination couches. This covering should be single use only and changed between patients.	If the plastic cover becomes torn or damaged the couch should be re-upholstered or replaced. Alcohol wipes should not be used to clean this equipment.
Crockery, cutlery	Machine wash. Rinse temp above 80C	
Curtains	Routine change every six months -immediately if contaminated.	Infection Prevention and Control team may request additional cleaning for some specific infections.
Damp dusting	Detergent and hot water using appropriate colour coded cloth.	
Denture pots	Patients must have their own named denture pot. These must remain single patient use. Clean with hot water and detergent. Store dry when not in use. Discard after patient discharge.	
Dental chair	Clean with hot water and detergent and dry before and after each session.	
Drip stands	**At Hospital sites** Clean with detergent and hot water between patient use, if soiled and at least weekly. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry	Store clean and dry and keep dust free when not in use.

Item	Recommended Method	Comments
	thoroughly. **In patients own homes** It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) and dry thoroughly.	
Dressing trolleys	Wash entire trolley with hot water and detergent or use detergent wipe before and after use. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly.	
Drainage and suction jars: 1. Disposable vacuum containers 2. Suction jars 3. Under-water seal bottles	 Use Vernagel gelling granules. Place in double yellow/ orange bag for incineration. Where possible use disposable. Non disposable i.e. glass and re-useable empty down sluice, clean with hot detergent and water and disinfect bottle in 10,000ppm chorine releasing agent then dry thoroughly. Use disposable	Store clean and dry and keep dust free when not in use For non disposable suction jars used for one individual patient the contents of the jar should be emptied into a lavatory if a sluice is not available. Then clean the jar with detergent and hot water. It will require disinfection before use on another patient.
Ear syringing equipment	**Propulse** Each day before use, the propulse must be disinfected using a chlorine based product to strength 1,000ppm. Fill tank with solution, run the machine to allow the solution to fill the pump and flexible tubing. Leave to stand for 10 minutes. Empty the tank, then rinse the system through with tap water before use At the end of the day disinfect as above. Rinse the machine through with running sterile water and dry thoroughly. **Jet tip Applicators** Single use disposable to be used. **Jobson Horne Probe** Return to appropriate sterile services. **Speculum for Otoscope** Disposable single use item. **Nootes Ear Tank** Return to appropriate sterile services.	
Earphones	Wipe with a dilute detergent solution or detergent wipe between patients. Where possible use single patient earphones for disposal on discharge.	To include earphones used for audit testing.
ECG Equipment (machine and leads)	Wipe with a dilute detergent solution or detergent wipe. Wipe at least weekly and if soiled.	Electrodes must be disposable. Store clean and dry and keep dust free when not in use.
Eye testing glasses and vision eye patches	Wipe with a dilute detergent solution or detergent wipe between patients and store clean and dry.	Eye patches should be made of a wipeable material.
Endotracheal tubes	Single use only.	
Enteral feeding	Follow manufactures instructions for each product.	

Item	Recommended Method	Comments
equipment.	**At hospital sites** The pump must be kept clean and dust free, wipe daily with detergent and water / detergent wipe. **In patients own homes** It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). **At both sites** Syringes – these are single patient use and may be re-used for a specified patient and that patient only for a period of no longer than 24 hours. Separate syringes should be used for medication, flushing, feeding and aspiration. All syringes should be cleaned thoroughly after each use with warm water, mild detergent and then allowed to air dry. Syringes should be stored covered.	When no longer required these should be returned to central equipment stores for cleaning prior to re-issue
Examination couches		Please see couches
Examination lamps	Wipe with damp cloth with hot water and detergent / detergent wipe daily and when visibly soiled.	Ensure that electrical supply is turned off before cleaning do not use large amounts of water.
Enuresis mats	Single patient use – wash with detergent and water / follow manufacturers instructions.	
Enuresis Alarms	As per manufacturers instructions.	
Fans	Need to be kept dust free. The outside and guard can be cleaned with detergent wipes when not operating. To clean the blades fan must first be dismantled by an appropriately trained person.	When purchasing new or replacing existing fans please contact Infection Prevention and Control for advice.
Floors (wet) Floors (dry)	Should be cleaned with a detergent solution. Disinfection is not normally required. Should be vacuum cleaned or with a dust- attracting dry mop.	Vacuum cleaners need to comply with standards set in BS5415.
Flower Vases	Wash with hot water and detergent and dry thoroughly.	Store clean and dry and keep dust free when not in use. **NOT IN THE SLUICE**.
Foam Wedges	**At hospital sites** Clean on patient discharge or when visibly soiled. Clean with hot water and detergent / detergent wipes and dry thoroughly. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent. **In patients own homes**: It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) When no longer required these should be returned to central equipment stores for cleaning prior to re-issue.	Use only if covered with a plastic waterproof cover.
Glucometer	Clean machine with hot water and detergent / detergent wipes weekly unless contaminated with blood or body fluids then clean immediately. Test strips – single use only.	
Gym Equipment (used by physio)	Clean all equipment with either hot water and detergent or detergent wipes between patient uses. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent (for dilution	

Item	Recommended Method	Comments
	see page 8).	
Hair Brushes	Single patient use.	
Height stick	Clean using either detergent and hot water or detergent wipes after use at the end of each session and store clean and dry.	
Hoists	**At Hospital sites / Clinics** Clean between each patient use either detergent and hot water or a detergent wipe. Hoists are also subject to a pre-planned maintenance work through the works department. **In patients own homes**: It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) Hoists are subject to a maintenance programme through central equipment stores. When no longer required these should be returned to central equipment stores for cleaning prior to re-issue.	
Hoist slings and slide sheets (fabric)	**Hoist slings – At hospital sites** Patients must have either their own re-useable hoist sling or disposable sling until discharge from hospital. On discharge it should be sent for laundered or disposal. **Hoist slings – In patients own homes** Patients must have their own hoist sling. When no longer required these should be returned to central equipment stores for cleaning prior to re-issue **Sliding sheets – At hospital sites** Patients must have their own sliding sheet if required, which should be laundered on discharge from hospital. **Sliding sheets – In patients own homes** Patients should have their own sliding sheet. When no longer required these should be returned to central equipment stores for cleaning prior to re-issue.	Any soiling of fabric items must be laundered immediately and **must not** be washed by hand in the department. All hoist slings are subject to maintenance programme either through works department or central equipment stores.
Humidifiers	**Free Standing Room Humidifiers** During use empty and clean reservoir daily using detergent and water, and dry thoroughly. Refill with sterile water only. Between patients and weekly when in use clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly. **Individual patient oxygen humidification systems** Disposable units and tubing must be used. Use sterile water and change at least daily.	Store clean and dry and keep dust free when not in use.
Infusion pumps	**At Hospital sites** The pump must be kept clean and dust free, wipe daily with detergent and hot water / detergent wipe. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly. **In patients own homes** It remains the responsibility of the nursing staff setting up the	Store clean and dry and keep dust free when not in use.

Item	Recommended Method	Comments
	infusion pump – as at hospital sites.	
Instruments e.g. forceps, clip removers	Single use items must be disposed of after use. Reusable items to be returned to the sterile services department.	
Instrument transport container (dental and podiatry)	Once emptied the container can be placed through a washer disinfector if available. If washer disinfector not available clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly.	
Interferential pads	Refer to manufacturer's guidance.	
Jugs (non-sterile procedures i.e. those used measure urine)	Disposable urinals should be used for emptying catheter bags. Jugs used for the measurement of urine are single use disposable and **must not** be left in the sluice.	
Kidney Dishes	Disposable single use. Discard into macerator if available; if not available dispose of empty receptacle in yellow/orange clinical waste bag.	Kidney dishes should not be used as vomit bowls.
Laryngoscopes	**Blades:** disposable single use **Handles:** wipe with hot water and detergent. If contaminated with blood or body fluids clean with detergent and hot water followed by disinfection using a chlorine releasing agent and dry thoroughly.	
Lavatories (including raised lavatory seats)	**At Hospital sites** Cleaning should be undertaken daily and when soiled. Clean both sides of the seat with detergent and hot water. If patients using facilities suffering from diarrhoea clean with detergent and water followed by disinfection using a chlorine releasing and dry thoroughly. **In patients own homes** It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). When no longer required these should be returned to central equipment stores for cleaning prior to re-issue	If these items show signs of age or wear and tear they must be taken out of use and disposed of.
Lavatory brushes	Store dry. Rinse thoroughly in toilet in flushing water and leave to dry in open sided holder. This is covered by the contracted cleaning team. The brushes should be changed when visibly soiled and always discarded following an outbreak or if used to clean a lavatory used by patients suffering from Clostridium Difficile.	
Linen Trolley Linen Skip	Should be cleaned with hot water a detergent at least weekly. If contamination occurs it should be cleaned immediately. If contaminated with blood or body fluids, clean with detergent and hot water followed by disinfection using a chlorine releasing agent and dry thoroughly.	
Locker Tops and Tables	**At Hospital sites** Clean with detergent and hot water and dry thoroughly daily, and on patient discharge. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly. **In patients own homes**	

Item	Recommended Method	Comments
	It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid).	
Mattress	**At Hospital sites** Wash with detergent and hot water / detergent wipes and dry. Cleaning required if soiled and on patient discharge. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly. **In patients own homes** It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). When no longer required these should be returned to central equipment stores for cleaning prior to re-issue.	Mattress must have plastic waterproof cover. In the event of the outer plastic cover becoming damaged (split) the item should be disposed of as clinical waste. Specialist mattresses should be cleaned according to manufacturers instructions.
Medicine pots + spoons	These **are single use** items only.	
Monkey poles	See bed frame cleaning.	
Mop heads		See Cleaning Equipment
Nebulisers, mask and tubing	Single patient use. – between use wash chamber and mask thoroughly with hot water and detergent, rinse and dry thoroughly. Replace weekly or if heavily soiled. When patient discharged discard single patient use item.	Clean the machine as per manufacturers instructions.
Needles	Single use only	
Oxygen tubing and mask	Single patient use. Each patient must have their own mask and tubing masks which should be cleaned with hot water and detergent as required if soiled, and change at least weekly. Discard on discharge from hospital.	
O_2 machine	Follow manufacturer's instructions damp dust daily clean filters weekly when in use or after each patient use.	
Peak flow machines	Use single use disposable mouthpieces.	Wherever possible allocate patients their own machine.
Pillows	Examination couches - pillows should be cleaned with hot water and detergent at the end of the day. Inpatient Services – clean with hot water and detergent on patient discharge and when soiled. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly. If contamination has leaked onto the fabric then the pillow **must** be disposed of as clinical waste.	Pillows must have plastic cover. In the event of the outer plastic cover becoming damaged the item should be disposed of as clinical waste
Podiatry chair	Clean with hot water and detergent and dry before and after each session. Use paper couch roll for each patient.	
Podiatry workstation / trolley	Clean entire trolley with hot water and detergent at the beginning of the session and when visibly soiled. Wipe with detergent wipes between each use.	Ensure no items are left on the trolley when not in use.
Pulse oximeter	Clean with detergent wipes between patients and at least weekly.	
Pressure relieving aids e.g. mattresses, cushion	**At Hospital sites** Must be allocated to an individual patient, cleaned when soiled and on discharge using hot water and detergent and dried thoroughly. **In patients own homes**	If contaminated with body fluids refer to manufacturers instructions

Item	Recommended Method	Comments
	It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). When no longer required these should be returned to central equipment stores for cleaning prior to re-issue.	
Razors (wet shave)	Use disposable single use or patients own.	Do not allow sharing of razors
Razors electric	Patients own only clean as per manufacturers instructions.	Do not allow sharing of razors
Scales	Clean with detergent and hot water or detergent wipes after each use.	
Scissors	Use sterile scissors for aseptic procedures (discard single use into 'sharps' container – return reusable scissors to HSDU for reprocessing). Non sterile scissors should not be used for wound dressings. Any non sterile scissors used for non-clinical tasks (e.g. flowers / admin) should be washed and dried thoroughly in detergent and hot water and wiped over with steret before and after each clean use.	
Speculae (vaginal)	Single use items.	
Sputum pots	Single use items – change daily.	
Sphygmomanometers		See blood pressure cuffs
Stethoscopes	Wipe the bell and diaphragm (the ends) with Steret between patient contact. Earpieces should be removed and cleaned with detergent and hot water / detergent wipes.	Infection Control recommends that each member of staff has their own Stethoscope.
Sticks, frames and crutches	**At Hospital sites and clinics** Clean with hot water and detergent / detergent wipe. **In patients own homes** It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). When no longer required these should be returned to central equipment stores for cleaning prior to re-issue.	
Suction equipment	All new suction machines purchased must be of a type with disposable collection bottle liners. **At Hospital sites** Change liner daily when in use. **Accessories** **Suction catheters** – single use. Use once and discard. **Filters** – disposable – change every three months or when wet or visibly soiled or as otherwise instructed by manufacturers. **Tubing** must be single patient use. **Machines** – wipe weekly or when soiled with hot water and detergent / detergent wipes. Dry thoroughly. **In patients own homes** **Bottles** - If disposable available change liner daily. If non disposable collection jars used the contents should be emptied down a lavatory and then cleaned with hot water and detergent and dried thoroughly. **Suction catheters** – single use only **Tubing** – Single patient use, flush through after each use and change every seven days unless copious amounts of secretions are present – if this is the case change daily.	Also see Drainage & Suction Jars

Item	Recommended Method	Comments
	Machine - It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). **Filter changes and maintenance** – carried out by central equipment services on long term loans as necessary. When no longer required these should be returned to central equipment stores for cleaning prior to re-issue.	
Tens machine	Pads - should be disposable single use items. Leads and machine - wipe with detergent wipe between uses by different patients, at least weekly or if dirty.	If contaminated with blood or body fluids refer to manufactures instruction.
Telephones	Keep dust free. Phones should be wiped with detergent wipes and then dried. It is expected that clinical staff take responsibility for the cleaning of this equipment.	
Tomometer Heads	Follow manufacturers guidance.	
Thermometers	Use disposable thermometers or those with a disposable sleeve. Digital – use a new sleeve cover for each use. Wipe thermometer with alcohol wipe between patients.	Mercury thermometers are **NOT** recommended.
Toothbrushes	Single patient use only.	
Tourniquets	Ideally disposal tourniquets should be available [for individual patients and disposed of on discharge]. If the above unavailable, wipable material tourniquets should be used and cleaned between patient use with detergent wipes. If contaminated with blood or body fluids these should be disposed of.	Fabric Tourniquets are not recommended as they are impractical to clean.
Toys	Toys must be cleaned with hot water and detergent / detergent wipes at least weekly and when soiled.	Soft toys and those made of wood are not recommended, as they are impractical to clean. Toy cleaning schedule should be available and records kept.
Urinals	**At Hospital sites** **Disposable** – disposed of into macerator. In the event of machine failure inform works Department immediately and dispose of bedpan contents / urinal into a lavatory or sluice then place bedpan / urinal into clinical waste bag for disposable. **In patients own homes** It is the user's responsibility to empty contents down a toilet, rinse thoroughly and dry. Store to keep dust free. When no longer required these should be returned to central equipment stores for cleaning prior to re-issue.	
Ultrasound probes	To be used only on intact skin. **For Leg Doppler** Remove gel from probe after each use with disposable paper towel. Then wipe the probe with a detergent wipe **Abdominal Bladder Scans** Remove gel from probe after each use with disposable paper towel. Then wipe the probe with a detergent wipe. **Vaginal Probes** Single patient use.	
Vacutainer (needle holders)	Single use, discard after each procedure.	

Item	Recommended Method	Comments
Vaginal Cones	Single patient use	
Volumatic	Single patient use	
Vomit bowls	**Disposable** - single use discard into macerator or dispose of contents into a lavatory and then dispose of receptacle in yellow clinical waste bag.	
Wax baths	Wax should be processed between patients at 70°C for at least 3 minutes.	Only use on patients with intact skin and without skin condition.
Wheelchairs	**At Hospital sites** Clean weekly and when visibly soiled with hot water and detergent / detergent wipes. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly. **In patients own homes** It is the users responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid).	
Weighing scales (seated adult)	Line with disposable paper towels. Clean with hot water and detergent / detergent wipe. If contaminated with blood or body fluids clean with detergent and hot water followed by disinfection using a chlorine releasing agent and dry thoroughly.	
Work Surfaces	Clean daily with hot water and detergent / detergent wipes.	

If there is a particular item not stated above, please contact the Infection Prevention and Control Department for further details (01502 719534).

All wards and departments are required to maintain a inventory of equipment with a cleaning schedule and proof of compliance that will be checked at the departments annual infection control audit.

14. Spillages

Procedure for Dealing with Body Fluid Spill on Hard Surface

- All spillages should be considered potentially infectious regardless of the patient's condition. Blood and body fluids may carry infectious micro organisms.
- Clinical staff are responsible for cleaning and disinfection of blood and body fluid spillages and should do so promptly wearing the correct personal protective equipment (PPE) (see standard precautions policy) following one of the two methods described below.
- All waste materials generated when mopping up body fluid spills, should be treated as Hazardous and disposed of accordingly.
- Hands must be washed following removal of PPE.

Method 1:

- Sprinkle absorbent disinfectant granules over the spillage and allow them to absorb the liquid for about 2 minutes.
- Remove waste and dispose of in a yellow/orange waste bag (Hazardous waste).
- The area must then be cleaned thoroughly using detergent and water and dried.

Method 2:

- The spillage should be covered with disposable paper towel to soak up excess. These should then be gathered up and placed in a yellow/orange waste bag (Hazardous waste).
- The area must then be cleaned thoroughly using detergent and hot water and dried.
- The area must then be disinfected using a chlorine releasing agent - **Urine and vomit spillages:**
- Chlorine releasing agents must never be poured directly onto urine or vomit as this causes chlorine gas to be released.
- For urine and vomit spillages follow method 2.

Spills on soft furnishings:

- Clean spills immediately
- Cover with disposable paper towel to soak up excess. These should then be gathered up and placed in a yellow waste bag (Hazardous waste).
- The area must then be cleaned thoroughly using detergent and hot water.
- A steam clean should then be carried out by contract cleaners (this will need to be requested)

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16. Author

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